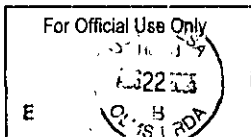


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 004-180 10371	2. Fiscal Year Covered From: 01/01/2004 Through: 12/31/2004
3. Name and address of person filing. Name Franklin L Gallegos P.O. Box, Bldg., Room No., if any Street 207 North Sanborn Road City Salinas State California ZIP Code + 4 93905	4. Name, file number, and address of labor organization. Name Teamsters Union Local #890 Labor Organization File Number 004-180 P.O. Box, Building and Room Number, if any Street 207 North Sanborn Road City Salinas State California ZIP Code + 4 93905
5. Position in labor organization. President	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u><i>Franklin Gallegos</i></u>	On <u>08-12-2005</u> <u>831-424-5743</u> Date Telephone Number

Name of Person Filing Franklin L. Gallegos

File Number U. 004-180

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Professional Group Administrators

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1212 South Main Street, #102

City Salinas

State California

93905

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Tri-Counties Welfare Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1212 South Main Street, #102

City Salinas

State California

ZIP Code + 4 93905

11.a. Nature of such dealing.

Professional Administrative Services

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

See Continuation Page.

12.b. Amount.

\$97.20

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.

Name of Person Filing James Goggin	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg, Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg, Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p>
	<p>11.b. Approximate dollar value of such dealing.</p>
	<p>12.a. Nature of interest held or income received.</p>
	<p>12.b. Amount.</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name Local 310 Fringe Benefit Funds, Inc.</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 3250 Euclid Avenue</p> <p>City Cleveland</p> <p>State Ohio ZIP Code + 4 44114</p>	<p>14.a. Nature of payment.</p> <p>The corporation which administers fringe benefit funds of affiliate Local 310 paid for airfare, room and board and travel expenses for my attendance and participation at the Segal Advisors Conference in Puerto Rico.</p>
<p>13.b. Is the Business an Employer <input checked="" type="checkbox"/> or Consultant ?</p>	<p>14.b. Amount of payment.</p> <p>\$2,990</p>

James Goggin

C. 3/29/94

Boyd & Watterson Smith & W Restaurant,
Washington, D.C.
Meal at AFL-CIO Conference.

I did not see the bill and I do not know the price of
the meal